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Group work during the governance workshop in the Plateau department. Photo Credit: Jean-Claude Lodjo

USAID INTEGRATED HEALTH SERVICES ACTIVITY

THE LEADERSHIP, MANAGEMENT, AND GOVERNANCE APPROACH

The ongoing decentralization of the health system in Benin places significant responsibility on local stakeholders for administrative matters in terms of monitoring and mobilizing resources, particularly for community health. These responsibilities, in turn, require enhanced capacity to manage the planning of resource allocation, implementation, and monitoring of community health programs.

To strengthen these skills and promote good intersectoral coordination of health interventions among communes and departments, the US Agency for International Development (USAID) Integrated Health Services Activity (IHSA), implemented by Management Sciences for Health and its partners, uses an internationally proven program: Leadership, Management, and Governance (LMG). Two levels of partners were targeted using the Leadership Development Program Plus (LDP+) at the health facility level and the governance strengthening program at the commune level. LDP+ is a process for identifying challenges to be met as a team to achieve defined outcomes by developing practical solutions using local resources and expertise. Governance is a process of collective decision making to ensure the ongoing vitality and performance of organizations or health systems that protect, promote, or restore people's health.

TRAINING OF AGENTS TO SOLVE CHALLENGES

The project has used the governance program to support teams, including prefectural and mayoral agents in the departments of Plateau and Ouémé, since 2021. In both departments, the goal was to enable better use of the state funds allocated for community health.

- In Plateau, the teams under the leadership of the prefect have set the challenge of obtaining a result of 0% to 50% consumption of the funds allocated for community health by the end of 2021. To do this, a consensual approach for the validation of payment files and supporting documents has been developed in compliance with the procedures for consumption of funds allocated by the state.
- In Ouémé, alignment meetings between the prefecture authorities and the communes have been held, and the commune management teams have been trained. The implementation period has not yet ended.

The project supported the teams in developing a common vision based on a major challenge. After detailing the situation in a structured way, based on current health data, the teams agreed on a goal. All root causes that explain this challenge were detailed, and the teams established action plans that identified all priority corrective actions.

- In the area of maternal, neonatal and child health, the Departmental Health Directorate (DDS) of Plateau has set a goal of reducing the number of maternal deaths within hospitals from 24 deaths (recorded between October 1, 2020, and March 31, 2021) to 14 (between October 1, 2021, and March 31, 2022). To this end, the project worked with the DDS and health zone teams on several activities, including reorganizing maternity and postpartum monitoring services with the permanent presence of a qualified worker in these wards, having administrative staff take night shifts, and increasing the availability of labile blood products.
- At the departmental and health zone levels in Ouémé, the teams set a goal of increasing the rate of the fourth antenatal consultation (standard CPN4) for two health zones.

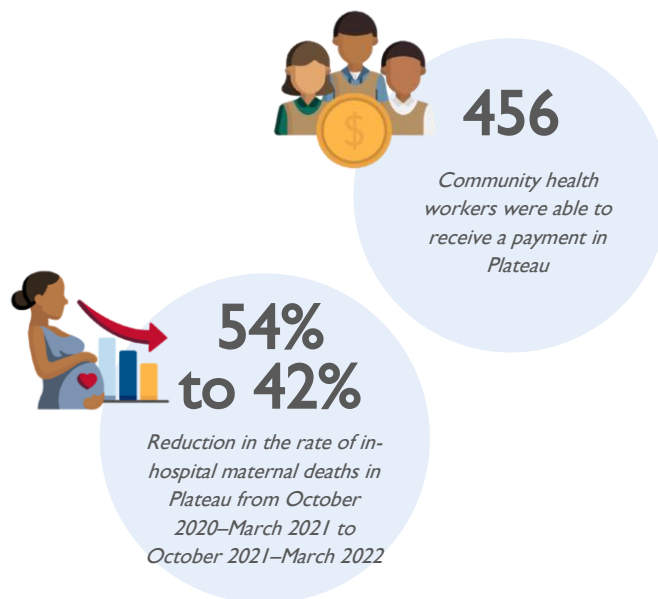
IMPACT

Thanks to the work of the agents, results have been obtained by the teams of the communes and health zones in Plateau using the LMG approach to manage funds for community health. Similarly, the Departmental Health Directorates and health zones in Plateau and Ouémé have demonstrated results in meeting the challenges they set for themselves.

- For the management of funds for community health in Plateau: The teams in the Plateau communes met their goal with an average consumption of 85.1% of the funds allocated for community health. These results have led to concrete achievements, such as the payment of 456 community health workers in the department.
- For the maternal health component in Plateau: After six months of implementation of the action plan under the LDP+ approach, the number of in-hospital maternal deaths decreased from 24 (October 2020–March 2021) to 11 (October 2021–March 2022)—a reduction in the death rate in the DDS target formations of 54% compared to the 42% initially targeted.
- In Ouémé, there was a 3-percentage point gain in CPN4 use. Between July 1, 2021, and March 31, 2022, the department increased the number of pregnant women attending a CPN4 from 38% to 41% compared to the same period one year earlier. It is also noted that the rate of malaria case testing in the third health zone increased from 94.96% to 97.19%.

At this stage of implementation, it is difficult to directly link these results to the LDP+ approach, but the corrective actions implemented through the LDP+ exercise have certainly contributed.

These approaches, which focus on building the LMG capacity of health agents and administrative officials at the decentralized level, have the potential to positively impact the health system in Benin and galvanize teams to address challenges and improve performance to improve the quality of care.



ABOUT THE PROJECT

The five-year Integrated Health Services Activity (IHSA) (2018-2023), funded by the US Agency for International Development (USAID), is implemented in four departments (Ouémé, Plateau, Atacora, and Alibori) in Benin. Its objective is to strengthen local expertise in delivering high-impact malaria, family planning (FP), maternal and child health (MCH), gender-based violence (GBV), and prevention and control of COVID-19 services with strong citizen engagement, to reduce maternal, neonatal, child and adolescent girls' mortality and morbidity. IHSA is implemented by Management Sciences for Health (MSH) in collaboration with four local and one international NGO partners.

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